



TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/767,640	
	Filing Date	01/13/2004	
	First Named Inventor	Randall R. Bryd	
	Art Unit	3612	
	Examiner Name	Pedder, Dennis H.	
Total Number of Pages in This Submission	3	Attorney Docket Number	121.01NP

ENCLOSURES (Check all that apply)		
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	EDWARD S. SHERMAN	
Signature		
Date	11/30/2004	

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Application Number	10767.640
Filing Date	01/13/2004
First Named Inventor	Randall R. Bryd
Art Unit	3612
Examiner Name	Pedder, Dennis H.
Attorney Docket Number	121.01NP

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☐ I hereby appoint the practitioners associated with the Customer Number:

☒ Please change the correspondence address for the above-identified application to:

☐ The address associated with
Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Randall R. Bryd
Address	218 Woodcreek Drive

City	Redding	State	CA	Zip	96003
Country	USA				
Telephone	530) 227-2137	Fax	530 245 4617		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/06)

SIGNATURE of Applicant or Assignee of Record

Signature			
Name	Randall R. Bryd		
Date	11/29/04	Telephone	530) 227-2137

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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